

CLERK US DISTRICT COURT  
NORTHERN DIST. OF TX  
FILED

2020 MAR 10 AM 9:58

PRISONER'S CIVIL RIGHTS COMPLAINT (Rev. 05/2015)

IN THE UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF TEXAS  
LUBBOCK DIVISION

DEPUTY CLERK 

BENNIE L. COLLINS 1316764  
Plaintiff's Name and ID Number

EAST TEXAS TREATMENT FACILITY (MTC)  
Place of Confinement

**5-20 CV 0055-H**

CASE NO. \_\_\_\_\_  
(Clerk will assign the number)

v.

MANAGEMENT TRAINING CORPORATION (MTC)  
Defendant's Name and Address

TEXAS DEPARTMENT OF CRIMINAL JUSTICE (TDCJ)  
Defendant's Name and Address

UNIVERSITY OF TEXAS MEDICAL BRANCH (UTMB)  
Defendant's Name and Address  
(DO NOT USE "ET AL.")

---

**INSTRUCTIONS - READ CAREFULLY**

**NOTICE:**

**Your complaint is subject to dismissal unless it conforms to these instructions and this form.**

1. To start an action you must file an original and one copy of your complaint with the court. You should keep a copy of the complaint for your own records.
2. Your complaint must be legibly handwritten, in ink, or typewritten. You, the plaintiff, must sign and declare under penalty of perjury that the facts are correct. If you need additional space, **DO NOT USE THE REVERSE SIDE OR BACK SIDE OF ANY PAGE.** ATTACH AN ADDITIONAL BLANK PAGE AND WRITE ON IT.
3. You must file a separate complaint for each claim you have unless the various claims are all related to the same incident or issue or are all against the same defendant, Rule 18, Federal Rules of Civil Procedure. Make a short and plain statement of your claim, Rule 8, Federal Rules of Civil Procedure.
4. When these forms are completed, mail the original and one copy to the clerk of the United States district court for the appropriate district of Texas in the division where one or more named defendants are located, or where the incident giving rise to your claim for relief occurred. If you are confined in the Texas Department of Criminal Justice, Correctional Institutions Division (TDCJ-CID), the list labeled as "VENUE LIST" is posted in your unit law library. It is a list of the Texas prison units indicating the appropriate district court, the division and an address list of the divisional clerks.

**FILING FEE AND IN FORMA PAUPERIS (IFP)**

1. In order for your complaint to be filed, it must be accompanied by the statutory filing fee of \$350.00 plus an administrative fee of \$50.00 for a total fee of \$400.00.
2. If you do not have the necessary funds to pay the fee in full at this time, you may request permission to proceed *in forma pauperis*. In this event you must complete the application to proceed *in forma pauperis*, setting forth information to establish your inability to prepay the fees and costs or give security therefor. You must also include a current six-month history of your inmate trust account. If you are an inmate in TDCJ-CID, you can acquire the application to proceed *in forma pauperis* and the certificate of inmate trust account, also known as *in forma pauperis* data sheet, from the law library at your prison unit.
3. The Prison Litigation Reform Act of 1995 (PLRA) provides "... if a prisoner brings a civil action or files an appeal *in forma pauperis*, the prisoner shall be required to pay the full amount of a filing fee." See 28 U.S.C. § 1915. Thus, the court is required to assess and, when funds exist, collect, the entire filing fee or an initial partial filing fee and monthly installments until the entire amount of the filing fee has been paid by the prisoner. If you submit the application to proceed *in forma pauperis*, the court will apply 28 U.S.C. § 1915 and, if appropriate, assess and collect the entire filing fee or an initial partial filing fee, then monthly installments from your inmate trust account, until the entire \$350.00 statutory filing fee has been paid. (The \$50.00 administrative fee does not apply to cases proceeding *in forma pauperis*.)
4. If you intend to seek *in forma pauperis* status, do not send your complaint without an application to proceed *in forma pauperis* and the certificate of inmate trust account. Complete all essential paperwork before submitting it to the court.

**CHANGE OF ADDRESS**

It is your responsibility to inform the court of any change of address and its effective date. Such notice should be marked "NOTICE TO THE COURT OF CHANGE OF ADDRESS" and shall not include any motion for any other relief. Failure to file a NOTICE TO THE COURT OF CHANGE OF ADDRESS may result in the dismissal of your complaint pursuant to Rule 41(b), Federal Rules of Civil Procedure.

**I. PREVIOUS LAWSUITS:**

A. Have you filed *any* other lawsuit in state or federal court relating to your imprisonment? ☒ YES ☐ NO

B. If your answer to "A" is "yes," describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, giving the same information.)

1. Approximate date of filing lawsuit: JULY 16, 2019
2. Parties to previous lawsuit:  
Plaintiff(s) BENNIE L. COLLINS  
Defendant(s) SHERIFF KELLY S. ROKIE
3. Court: (If federal, name the district; if state, name the county.) FEDERAL (NORTHERN DIST. LBR DIVISION)
4. Cause number: 5:19-CV-400140-BQ
5. Name of judge to whom case was assigned: GORDON (JR.)
6. Disposition: (Was the case dismissed, appealed, still pending?) STILL PENDING
7. Approximate date of disposition: UNKNOWN

II. PLACE OF PRESENT CONFINEMENT: EAST TEXAS TREATMENT FACILITY

III. EXHAUSTION OF GRIEVANCE PROCEDURES:

Have you exhausted all steps of the institutional grievance procedure? YES ☐ NO ☒

Attach a copy of your final step of the grievance procedure with the response supplied by the institution.

IV. PARTIES TO THIS SUIT:

A. Name and address of plaintiff: BERNIE L. COLLINS P.O. BOX 8000 HENDERSON,  
TX. 75653-8000

B. Full name of each defendant, his official position, his place of employment, and his full mailing address.

Defendant #1: MANAGEMENT TRAINING CORPORATION 900 INDUSTRIAL DRIVE  
HENDERSON, TX. 75652

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

CONSPIRED WITH OTHER DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO COUNSEL  
AND ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREATMENT) TORTURE

Defendant #2: TEXAS DEPARTMENT OF CRIMINAL JUSTICE (TDCJ)

CONSPIRED WITH OTHER DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO COUNSEL

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

CONSPIRED WITH OTHER DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO COUNSEL  
AND ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREATMENT) TORTURE

Defendant #3: UNIVERSITY OF MEDICAL BRANCH (UTMB) 900 INDUSTRIAL DRIVE  
HENDERSON, TX. 75652 (MEDICAL DEPARTMENT)

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

CONSPIRED WITH DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO PROPER MEDICAL  
TREATMENT (TORTURE)

Defendant #4: LUBBOCK COUNTY (LCNC) LUBBOCK, TX.

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

CONSPIRED WITH DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO COUNSEL  
AND ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREATMENT) TORTURE

Defendant #5: SHERIFF KELLY S. POWIE LUBBOCK COUNTY SHERIFF'S  
OFFICE

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

CONSPIRED WITH DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO COUNSEL  
AND ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREATMENT) TORTURE

\* DEFENDANT #6 OFFICER LUGO (TRANSPORTANT) LCDC LUBBOCK COUNTY  
DETENTION CENTER

CONSPIRED WITH DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO COUNSEL AND  
ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREATMENT) TORTURE

\* DEFENDANT #7 ENTIRE SECURITY STAFF IN PROCESSING DEPARTMENT (LCDC) INTAKE  
LUBBOCK COUNTY DETENTION CENTER 3RD SHIFT / 1ST SHIFT

CONSPIRED WITH DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO COUNSEL  
AND ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREATMENT) TORTURE

\* DEFENDANT #8 OFFICER WORKING 3RD SHIFT ON A-1 ON JAN. 24TH  
2020

CONSPIRED WITH DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO COUNSEL  
AND ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREATMENT) TORTURE

\* DEFENDANT #9 LCDC MEDICAL DEPARTMENT (LITMB) STAFFING TEAM  
LUBBOCK COUNTY DETENTION CENTER

CONSPIRED WITH DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO COUNSEL  
AND ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREATMENT) TORTURE

\* DEFENDANT #10 HEAD WARDEN (J. RUPERT) 900 INDUSTRIAL DRIVE  
HENDERSON, TX. 75652

CONSPIRED WITH DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO COUNSEL  
AND ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREATMENT) TORTURE

\* DEFENDANT #11 ASSISTANT WARDEN (L. THOMAS) 900 INDUSTRIAL DRIVE  
HENDERSON, TX. 75652

CONSPIRED WITH DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO COUNSEL  
AND ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREATMENT) TORTURE

\* DEFENDANT #12 ASSISTANT WARDEN (E. THYSON) 900 INDUSTRIAL DRIVE  
HENDERSON, TX. 75652

CONSPIRED WITH DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO COUNSEL  
AND ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREATMENT) TORTURE

\* DEFENDANT #13 PROGRAM DIRECTOR (A. DOVEL) 900 INDUSTRIAL DRIVE  
HENDERSON, TX. 75652

CONSPIRED WITH DEFENDANT TO DEPRIVE ME OF MY RIGHT TO COUNSEL  
AND ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREATMENT) TORTURE

**MTC - East Texas Treatment Facility****Intermediate Sanction Facility**☐ Parole ☐ Probation**Weekly Summary Progress Note**

Client's Name: \_\_\_\_\_ TDCJ# \_\_\_\_\_ Dorm/Bunk: \_\_\_\_\_

Week of: (Mon. – Sun.) \_\_\_\_\_ TO: \_\_\_\_\_ Primary Counselor: \_\_\_\_\_

Direct Treatment Hours	MON	TUE	WED	THUR	FRI	SAT	SUN	Total
Process Group								
Encounter Group								
Thinking for a change/cognitive intervention								
Life Skills /HIV								
Relapse prevention								
Anger Management /Emotional Wellbeing								
Living in Balance/ Emotional Wellbeing								
How to be a Responsible Father								

INDIRECT TREATMENT HOURS	MON	TUE	WED	THUR	FRI	SAT	SUN	Total
AA/NA/SOS/Winner's Circle/C.R.								
Unlocking The Mind								
Thinking my way								
Peer support								
Personal Improvement								
Community Meeting/AMD								
Community Meeting/PMD								
Orientation								
Alternative Treatment/Work								

Topics of Most Interest This Week: \_\_\_\_\_

Treatment Plan Assignment: \_\_\_\_\_

Information You Want Your Counselor to Know: \_\_\_\_\_

Structure Position: \_\_\_\_\_ Did you receive mail/visits? Yes No

Thinking Reports Written \_\_\_\_\_

Client received \_\_\_\_\_ direct treatment hours.

Client received \_\_\_\_\_ indirect treatment hours.

If less than 20 hours, counselor must explain: \_\_\_\_\_

Client's level of change / participation: ☐ Pre-contemplation ☐ Contemplation ☐ Progressing ☐ Progressing slowly ☐ Good planning /preparation

Offender Progress: \_\_\_\_\_

Counselor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_



Case 6:20-cv-00277-JDK-JDL Document 1 Filed 02/10/20 Page 6 of 14 PageID #: 6  
\* DEFENDANT #14 CLASSIFICATION MANAGER (L. KINSEY) 900 INDUSTRIAL DRIVE  
HENDERSON, TX. 75652

CONSPIRED WITH DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO  
COUNSEL AND ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER  
TREATMENT) TORTURE

\* DEFENDANT #15 TRANSPORTATION SUPV (C. BYRD) 900 INDUSTRIAL DRIVE  
HENDERSON, TX. 75652

CONSPIRED WITH DEFENDANT TO DEPRIVE ME OF MY RIGHT TO COUNSEL  
AND ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREATMENT)  
TORTURE

\* DEFENDANT #16 INTAKE COORDINATOR (C. ORR) 900 INDUSTRIAL DRIVE  
HENDERSON, TX. 75652

CONSPIRED WITH DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO COUNSEL  
AND ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREAT-  
MENT) TORTURE

\* DEFENDANT #17 GRIEVANCE (B. HUDSON) 900 INDUSTRIAL DRIVE HENDERSON,  
TEXAS 75652

CONSPIRED WITH DEFENDANT TO DEPRIVE ME OF MY RIGHT TO COUNSEL AND  
ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREATMENT)  
TORTURE

\* DEFENDANT #18 HUMAN RESOURCES (M. ASHBY) 900 INDUSTRIAL DRIVE  
HENDERSON, TEXAS 75652

CONSPIRED WITH DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO COUNSEL  
AND ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREATMENT)  
TORTURE

\* DEFENDANT #19 LAW LIBRARY (J. WILSON) 900 INDUSTRIAL DRIVE HENDERSON,  
TX. 75652

CONSPIRED WITH DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO COUNSEL AND  
ACCESS TO COURT / RIGHT TO MEDICAL TREATMENT (PROPER TREATMENT)  
TORTURE

\* DEFENDANT #20 MAIL ROOM (T. MORRIS) 900 INDUSTRIAL DRIVE HENDERSON,  
TX. 75652

CONSPIRED WITH DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO COUNSEL AND  
ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREATMENT)  
TORTURE

\* DEFENDANT #21 OFFENDER PROPERTY OFFICER (M. NEAL) 900 INDUSTRIAL  
DRIVE HENDERSON, TX. 75652

CONSPIRED WITH DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO COUNSEL  
AND ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREATMENT)  
TORTURE

## SLIP

Housing: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

To: \_\_\_\_\_

From: \_\_\_\_\_

Rule#Incident:

Feeling:

Tool used:

## SLIP

Housing: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

To: \_\_\_\_\_

From: \_\_\_\_\_

Rule#Incident:

Feeling:

Tool used:

## SLIP

Housing: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

To: \_\_\_\_\_

From: \_\_\_\_\_

Rule#Incident:

Feeling:

Tool used:

## SLIP

Housing: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

To: \_\_\_\_\_

From: \_\_\_\_\_

Rule#Incident:

Feeling:

Tool used:

## SLIP

Housing: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

To: \_\_\_\_\_

From: \_\_\_\_\_

Rule#Incident:

Feeling:

Tool used:

## SLIP

Housing: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

To: \_\_\_\_\_

From: \_\_\_\_\_

Rule#Incident:

Feeling:

Tool used:

\* DEFENDANT #22 MEDICAL - DEPT. (B. CAIN) 900 INDUSTRIAL DRIVE  
HENDERSON, TX. 75652

CONSPIRED WITH DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO COUNSEL  
AND ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREATMENT)  
TORTURE

\* DEFENDANT #23 TACS CONTRACT MONITOR (TOLBERT / DROMGOOLE) 900  
INDUSTRIAL DRIVE HENDERSON, TX. 75652

CONSPIRED WITH DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO COUNSEL  
AND ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREATMENT)  
TORTURE

\* DEFENDANT #24 COUNSELOR LCDC (LORI BORCHARDT) 900 INDUSTRIAL  
DRIVE HENDERSON, TX. 75652

CONSPIRED WITH DEFENDANTS TO DEPRIVE ME OF MY RIGHT TO COUNSEL  
AND ACCESS TO COURTS / RIGHT TO MEDICAL TREATMENT (PROPER TREAT-  
MENT) TORTURE

NOTE: PLAINTIFF'S LIFE IS BEING PUT IN IMMEDIATE DANGER AS  
PLAINTIFF FEARS FOR HIS LIFE BEING HOUSED AT THIS FACILITY  
FOR OVER 30 DAYS WHILE BEING DENIED THE PROPER MEDICAL  
ATTENTION AND ACCESS TO THE COURTS AND COUNSEL. NO X-RAYS,  
MRI(S), NOR ANY OTHER FORM OF TEST RUN TO CONSIDER PLAINTIFF'S  
PHYSICAL HEALTH STATUS ALSO NO SLEEP TEST AS PLAINTIFF SUFFERS  
FROM SLEEP APNEA AND USES A C-PAD MACHINE (FACILITY REFUSES TO  
GIVE PLAINTIFF ONE). PLAINTIFF HAS DEGENERATIVE DISC DISEASE  
DISORDER WHICH CAUSES GRAVE PAINS DAILY (NECK AND LOWER BACK)  
DAMAGED. PLAINTIFF SUFFERS WITH HIP PAIN (BOTH LEFT AND RIGHT)  
AS BONES WERE CUT OUT TO FIX RIGHT HAND FROM GUN SHOT WOUNDS  
PLAINTIFF'S RIGHT HAND IS IN CONSTANT PAIN ALL THE TIME AS  
PLAINTIFF HAS A TITANIUM PLATE AND NINE(9) SCREWS INSIDE OF  
IT. PLAINTIFF IS FORCED TO WALK LONGER DISTANCES THAN REQUIRE  
BY OUTSIDE PHYSICIAN AND THERAPIST ALSO FORCED TO STAND AND SIT  
LONGER THAN REQUIRED BY OUTSIDE PHYSICIAN AND THERAPIST.  
ALSO CYST ON RIGHT KIDNEY COULD EITHER BE CANCEROUS OR  
COULD GROW LARGER CAUSING KIDNEY FAILURE TO RIGHT KIDNEY  
NOTHING DONE TO MEDICALLY TREAT PLAINTIFF FOR PROBLEMS  
(PHYSICAL) AT ALL. PLAINTIFF IS SUFFERING WITH PAINS DAILY.

NOTE: PLAINTIFF HAS BEEN IN ADMINISTRATIVE SEGREGATION FOR 14 DAYS  
NOW FOR REFUSAL TO GET ON A TOP BUNK DUE TO (LITMBS) MEDICAL  
STAFF'S NEGLIGENCE TO PLACE PHYSICAL RESTRICTIONS ON PLAINTIFF  
AFTER ASSIGNING PLAINTIFF A WALKER ON JAN. 31, 2020



**Staff Relate From Offender**

To: \_\_\_\_\_ From (printed name): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Offender Signature \_\_\_\_\_ TDCJ# \_\_\_\_\_ Dorm \_\_\_\_\_

**Staff Relate From Offender**

To: \_\_\_\_\_ From (printed name): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Offender Signature \_\_\_\_\_ TDCJ# \_\_\_\_\_ Dorm \_\_\_\_\_

## V. STATEMENT OF CLAIM:

State here in a short and plain statement the facts of your case, that is, what happened, where did it happen, when did it happen, and who was involved. Describe how each defendant is involved. You need not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach extra pages if necessary, but remember the complaint must be stated briefly and concisely. IF YOU VIOLATE THIS RULE, THE COURT MAY STRIKE YOUR COMPLAINT.

ON JAN. 24, 2020 I WAS TRANSPORTED FROM THE LUBBOCK COUNTY DETENTION CENTER (LCDC) TO THE EAST TEXAS TREATMENT FACILITY (MTC) (ISFT) AND THE OFFICERS AT (LCDC) REFUSED ME ALL MY LEGAL MATERIALS DENYING ME MY RIGHT TO THEM. ONCE I MADE IT TO THE HENDERSON UNIT XQ, I FOUND OUT THAT MEDICAL WITH THE (LCDC) NEGLECTED TO SEND INFORMATION OF MY PHYSICAL / MEDICAL CONDITIONS AS WELL. THE EAST TEXAS TREATMENT FACILITY LAW LIBRARY IS A NON-FUNCTIONAL LAW LIBRARY AS IT HAS NO ACT WAY TO CONDUCT ANY RESEARCH AND MEDICAL HAS ALSO FAILED TO TREAT ME FOR MY MEDICAL CONDITIONS HERE ALSO.

## VI. RELIEF:

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

PLAINTIFF SEEK ALL DAMAGES FROM ALL DEFENDANTS \$13.5 MILLION ALSO IMMEDIATE TRANSFER TO ANOTHER (ISF) FACILITY

## VII. GENERAL BACKGROUND INFORMATION:

A. State, in complete form, all names you have ever used or been known by including any and all aliases.

BENNIE LEE COLLINS, BENNY L. COLLINS, BENNY LEE COLLINS

B. List all TDCJ-CID identification numbers you have ever been assigned and all other state or federal prison or FBI numbers ever assigned to you.

915134, 1316764, 1078785

## VIII. SANCTIONS:

A. Have you been sanctioned by any court as a result of any lawsuit you have filed? YES ☒ NO

B. If your answer is "yes," give the following information for every lawsuit in which sanctions were imposed. (If more than one, use another piece of paper and answer the same questions.)

1. Court that imposed sanctions (if federal, give the district and division): N/A

2. Case number: N/A

3. Approximate date sanctions were imposed: N/A

4. Have the sanctions been lifted or otherwise satisfied? YES ☐ NO ☐

C. Has any court ever warned or notified you that sanctions could be imposed? \_\_\_\_\_ YES ☒ NO

D. If your answer is "yes," give the following information for every lawsuit in which a warning was issued. (If more than one, use another piece of paper and answer the same questions.)

1. Court that issued warning (if federal, give the district and division): N/A
2. Case number: N/A
3. Approximate date warning was issued: N/A

Executed on: \_\_\_\_\_  
DATE

BENNIE L. COLLINS

Benn Collins  
(Signature of Plaintiff)

#### PLAINTIFF'S DECLARATIONS

1. I declare under penalty of perjury all facts presented in this complaint and attachments thereto are true and correct.
2. I understand, if I am released or transferred, it is my responsibility to keep the court informed of my current mailing address and failure to do so may result in the dismissal of this lawsuit.
3. I understand I must exhaust all available administrative remedies prior to filing this lawsuit.
4. I understand I am prohibited from bringing an *in forma pauperis* lawsuit if I have brought three or more civil actions or appeals (from a judgment in a civil action) in a court of the United States while incarcerated or detained in any facility, which lawsuits were dismissed on the ground they were frivolous, malicious, or failed to state a claim upon which relief may be granted, unless I am under imminent danger of serious physical injury.
5. I understand even if I am allowed to proceed without prepayment of costs, I am responsible for the entire filing fee and costs assessed by the court, which shall be deducted in accordance with the law from my inmate trust account by my custodian until the filing fee is paid.

Signed this 3rd day of MARCH, 20 20  
(Day) (month) (year)

BENNIE L. COLLINS

Benn Collins  
(Signature of Plaintiff)

**WARNING: Plaintiff is advised any false or deliberately misleading information provided in response to the above questions may result in the imposition of sanctions. The sanctions the court may impose include, but are not limited to, monetary sanctions and the dismissal of this action with prejudice.**

**SLIP**

Housing: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

To: \_\_\_\_\_

From: \_\_\_\_\_

Rule#

Incident:

Feeling:

Tool used:

**SLIP**

Housing: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

To: \_\_\_\_\_

From: \_\_\_\_\_

Rule#

Incident:

Feeling:

Tool used:

**SLIP**

Housing: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

To: \_\_\_\_\_

From: \_\_\_\_\_

Rule#

Incident:

Feeling:

Tool used:

**SLIP**

Housing: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

To: \_\_\_\_\_

From: \_\_\_\_\_

Rule#

Incident:

Feeling:

Tool used:

**SLIP**

Housing: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

To: \_\_\_\_\_

From: \_\_\_\_\_

Rule#

Incident:

Feeling:

Tool used:

**SLIP**

Housing: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

To: \_\_\_\_\_

From: \_\_\_\_\_

Rule#

Incident:

Feeling:

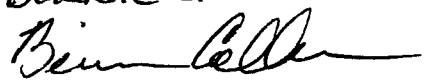
Tool used:

NOTICE TO THE COURT OF CHANGE OF  
ADDRESS PURSUANT TO  
RULE 41(B), FEDERAL RULES OF CIVIL PROCEDURE

DATE: 03/02/2021

DEAR DISTRICT COURT CLERK,

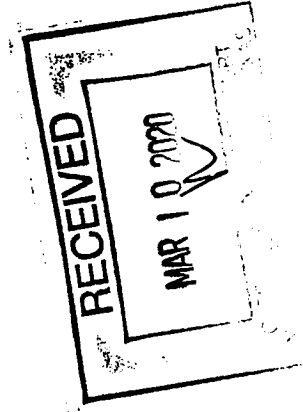
THIS IS TO NOTIFY THE COURTS THAT MY PHYSICAL ADDRESS  
HAS CHANGE TO P.O. BOX 8000 HENDERSON, TX. 75653-8000  
I'M AT THE (MTC) EAST TEXAS TREATMENT FACILITY.

RESPECTFULLY SUBMITTED  
BERNIE L. COLLINS B16764  
  
BLC



BENNIE L. COLLINS #1316761  
P.O. BOX 8060  
HEIDELSON, TEXAS 75653-8000

LEGAL MAIL



UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DIST. OF TX.  
OFFICE OF THE CLERK C-209  
1205 TEXAS AVE  
LUBBOCK, TEXAS 79401-4091

( VERY IMPORTANT )

79401-402771

(TIME SENSITIVE)

